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CONFIRMATION NO. 5626

<b>SERIAL NUMBER</b> 10/017,500	<b>FILING OR 371(c) DATE</b> 12/14/2001 <b>RULE</b>	<b>CLASS</b> 623	<b>GROUP ART UNIT</b> 3738	<b>ATTORNEY DOCKET NO.</b> 020460-001000US
<b>APPLICANTS</b> Motasim Sirhan, Sunnyvale, CA; John Yan, Los Gatos, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/002,595 11/01/2001 which claims benefit of 60/258,024 12/22/2000 and claims benefit of 60/308,381 07/26/2001 and is a CIP of 09/782,927 02/13/2001 PAT 6,471,980 and is a CIP of 09/782,804 02/13/2001 and is a CIP of 09/783,253 02/13/2001 and is a CIP of 09/783,254 02/13/2001				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/09/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 35	<b>TOTAL CLAIMS</b> 112	<b>INDEPENDENT CLAIMS</b> 18
<b>ADDRESS</b> 20350				
<b>TITLE</b> APPARATUS AND METHODS FOR VARIABLY CONTROLLED SUBSTANCE DELIVERY FROM IMPLANTED PROSTHESES				
<b>FILING FEE RECEIVED</b> 4178	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	